CAMPAIGN TREASURER'S REPORT SUMMARY					
Name (2) 305(0 D R) Address (number and street) City, State, Zip Code Check here if address has changed (4) Check appropriate box(es): Candidate Office Sought: Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications)	FEB 1 9 2016 BY: Vibilitary 10 30mm (3) ID Number: Check here if PC or ECO has disbanded Check here if PTY has disbanded Check here if no other IE or EC reports will be filed				
(5) Report Identifiers					
Cover Period: From 2 / 1 / 16 To Original Amendment Specific	2/ (9/ (6) Report Type: 6)				
(6) Contributions This Report	(7) Expenditures This Report				
Cash & Checks \$,, 150 _ 00	Monetary Expenditures \$, ,274. 54				
Loans \$, ,	Transfers to Office Account \$, , .				
Total Monetary \$, ,	Total Monetary \$,				
In-Kind \$, ,	,,,				
	(8) Other Distributions				
(9) TOTAL Monetary Contributions To Date \$	(10) TOTAL Monetary Expenditures To Date \$,33十.5十				
(11) Cert					
It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.) I certify that I have examined this report and it is true, correct, and complete:					
(Type name) SHARYH BROWNING ☐ Individual (only for IE or electioneering comm.) Treasurer ☐ Deputy Treasurer	(Type name) DAVID BLOWLING Candidate				
X haryn Browning Signature	Signature Stowning				

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name (2) I.D. Number (2)						
	d <u>2 / 1 / 16 through 2 /</u>		1) Page	of	1	
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10)	(11) Amount	
2/1/16	Custom Signs Today 2550 Okeechobee Bird West Palm Beach, Fr 33409	Eigns	CAN		274.54	
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CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name _	DAVID	BROWNING	(2) I.D. Number	
(3) Cover Pe	eriod <u>2</u> /1	/ 16 through 2 / 19	/ (4) Page	(of J

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(5) Date	(7)		(8)	(9)	(10)	(11)	(12)
(6)	Full Name (Last, Suffix, First, Middle)						
Sequence	Street Address &	C.	ontributor	Contribution	l= 1.: 1		
Number	City, State, Zip Code	Type	Occupation	Contribution Type	In-kind Description	Amendment	A
	MURPHY, HAROLD	1)00	Occupation	Type	Description	Amendment	Amount
	MURPHY, HAROLD 13245 Compton Rd Loxahatcher Grove PL 33470	, I		CHE			50.00
2,2,16	HASTING, BREAD 13245 Comptened Loxahatahee Grae FL 33470	a I		CHE			50."
2,16,16	LOUDA, J. WILLIAM 1300E Rd Loxahatcher Guzu FL 33470	Hu		CHE			50.00
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, ,							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES